

August 22, 2002

QS50 (02-64)

TO: Distribution

FROM: QS50/David J. Spacek

SUBJECT: Minutes of the MSFC Safety, Health, and Environmental Committee Meeting
(August 14, 2002)

The Safety, Health, and Environmental (SH&E) Committee met at 2:00 p.m. on Wednesday, August 14, 2002 in Building 4202, Conference Room 326A. The attendance list is maintained on file in the Industrial Safety Department (4202/307). The agenda for the meeting is attached as Enclosure 1.

Safety Moment (Dennis Davis/QS50)

Dennis provided the safety moment, informing the attendees of where the emergency exits and egress routes were located.

Election of Officers (Keith Cornett/UP10)

Keith reviewed the nomination process for the SHE Committee chairperson position, and explained that there was only one nominee, Nance Jo Ogozalek/ED33. Keith passed out ballots to the voting members of the SHE Committee that had Nance Jo's name on it, as well as a line for adding a write-in candidate. Before the voting was complete, Tom Dollman/SD40, volunteered as a nominee as well. The Committee agreed that the nominee placing second would serve as the deputy chairperson. Nance Jo Ogozalek was elected as chairperson, and Tom Dollman as deputy chairperson of the SHE Committee.

SHE Recognition at Next Marshall Team Meeting (Keith Cornett/UP10)

Keith notified the voting members that Art Stephenson had requested their presence at the next Marshall Team Meeting (MTM) so that he could introduce the new SHE Committee members.

ACTION SHE-02-001: All SHE Committee members are to attend the MTM on Monday, September 2, 2002, at 8:30 a.m. in Building 4200, Conference Room P110, to be introduced by Art Stephenson.

Working Meeting Schedule (Keith Cornett/UP10)

Keith informed the Committee members of the work session meeting schedule for the next several months. They will be held from 2:00 – 3:30 p.m., in 4202/326A, on September 18, October 16, and November 13, 2002. The schedule is included as Enclosure 2.

OSHA Mishap Reporting Requirements (Dennis Davis/QS50)

Dennis presented an overview on the recordability of injuries and illnesses, explaining the criteria utilized in making the appropriate determination. Several recent lost-time mishaps were discussed to help clarify the reporting requirements. The briefing is included as Enclosure 3.

SHE Program Assessment Process (Phil Robbins/CSC)

Phil briefly discussed the results from the STAR Consultants assessment of the MSFC SHE Program, as well as from the MSFC self-assessment checklists. He explained that the findings had been sorted into a corrective action checklist, with preliminary actionees assigned. A copy of the STAR Consultants Report was distributed to each of the Committee members in attendance. A sample of the corrective action matrix is included as Enclosure 4.

ACTION SHE-02-002: Each mentor will contact their assigned subcommittee chairperson to distribute the corrective action matrix applicable to that subcommittee, and assist in identifying the specific issues to be corrected.

Subcommittee Kickoff (Keith Cornett/UP10)

Keith described the initial steps necessary in setting up the SHE subcommittees. It is expected that the subcommittees will consist of 6-8 members, that minutes will be recorded of the subcommittee meetings, and that a template will be provided for recording the minutes. The presentation is included as Enclosure 5.

ACTION SHE-02-003: Each mentor will obtain a list of the Center practitioners for their assigned subcommittee function, and then meet with the subcommittee chairperson to identify member candidates.

MSFC Implementation Plan SHE Objectives for FY03 (Dave Spacek/QS50)

Dave explained that he was being requested to supply safety metrics for the FY03 MSFC Implementation Plan, and though in the future it is expected that the SHE Committee will be integral in identifying them, that due to time constraints he was simply informing the committee of his input. Dave told the attendees that rather than specify a lost-time incident rate (LTIR) of 0.10 or less as is in the FY02 plan, he would change that metric to simply state a “reduction of at least 10% in the lost time incident rate over the previous fiscal year”. The second metric (Zero Type A and B mishaps for the year) was left unchanged. The SHE Committee concurred with these two metrics going forward.

SHE Committee Meeting Agenda for August 28 (Dennis Davis/QS50)

Dennis presented the proposed agenda for the next SHE Committee meeting. Although most of the new subcommittees may have little, if anything, to report, it is expected that the subcommittees that have been in existence since the previous Central/Area SHE Committee structure report on their activity. The proposed agenda is included as Enclosure 6.

Other Items

- Keith Cornett made the following recommendations concerning SHE Committee membership:
 1. Since Information Technology (IT) will be a support function to the committee and subcommittees, it was recommended that this function be eliminated as a standalone subcommittee. The SHE Committee members voted and approved this change.
 2. Due to the nature of the work performed by the Contractor Safety Forum (CSF), it was recommended that this group be added as a voting member to the SHE Committee. The initial proposal also identified that Phil Robbins, as acting CSF chairperson, would not serve as the voting member on the SHE Committee due to his involvement with the VPP Implementation Team. The SHE Committee approved adding the CSF as a voting member, and after some discussion voted and approved that Phil Robbins serve as the CSF voting member on the SHE Committee.
- Nance Jo Ogozalek requested that the capability be added to the SCRS software to allow sorting of reports by building number.

ACTION SHE-02-004: Dennis Davis to contact HEI about adding capability to SCRS to sort by building number.

The next meeting of the SHE Committee is scheduled for Wednesday, August 28, 2002, at 2:00 p.m. in 4200/P110.

Original signed by

David J. Spacek
Manager
Industrial Safety Department

6 Enclosures

Distribution:
SHE Committee Members

cc:
CD20/P. Schultz
CSC/P. Robbins
QS40/R. Mize
QS50/D. Davis/J. Milburn
UP10/K. Cornett

ENCLOSURE 1

**SHE Committee Work Session
Agenda
August 14, 2002
2:00 pm - 3:30 pm
Building 4202/326A**

- **Safety Moment Dennis Davis**
- **Officers (Keith Cornett)**
- **SHE Recognition at next Marshall team meeting:**
 - **September 2**
 - **Building 4200 Room P110**
 - **830-930AM**
- **Working Meeting Schedule (Keith Cornett)**
- **OSHA Mishap Reporting Requirements (Dennis Davis)**
- **SHE Program Assessment Process (Phil Robbins)**
- **Subcommittee Kick-off (Keith Cornett)**
- **MSFC Implementation Plan SHE Objectives for FY03 (Dave Spacek)**
- **SHE Committee Meeting Agenda for August 28 (Dennis Davis)**

Work Session Meeting Schedule

- All meetings in Building 4202, Room 326A
- Meetings are scheduled for following dates
 - September 18
 - October 16
 - November 13
- Meetings go from 2-330PM



Marshall Safety First Class

RECORDABILITY OF MISHAPS

Industrial Safety Department

August 14, 2002

ENCLOSURE 3

Dennis Davis/QS50



Basic Definition of the Types of Cases to be Recorded



OSHA 29 CFR 1904.7: *...work-related deaths, injuries and illnesses other than minor injuries requiring only first aid treatment and which do not involve medical treatment, loss of consciousness, restriction of work or motion, or transfer to another job.* **CFR 1904.8(a):** *Employers are required to record all needle sticks and sharps injuries involving contamination by another person's blood or other potentially infectious material.* **CFR 1904.12 (a):** *Musculoskeletal disorders are treated like all other illnesses/injuries; they must be recorded if they result in days away, restricted work, transfer to another job, or medical treatment beyond first aid.*



Injury or Illness?



Occupational Injury: Any **injury** such as a cut, fracture, sprain, amputation, etc., which results from a **work accident** or from an **exposure** involving a **single incident** in the **work environment**.

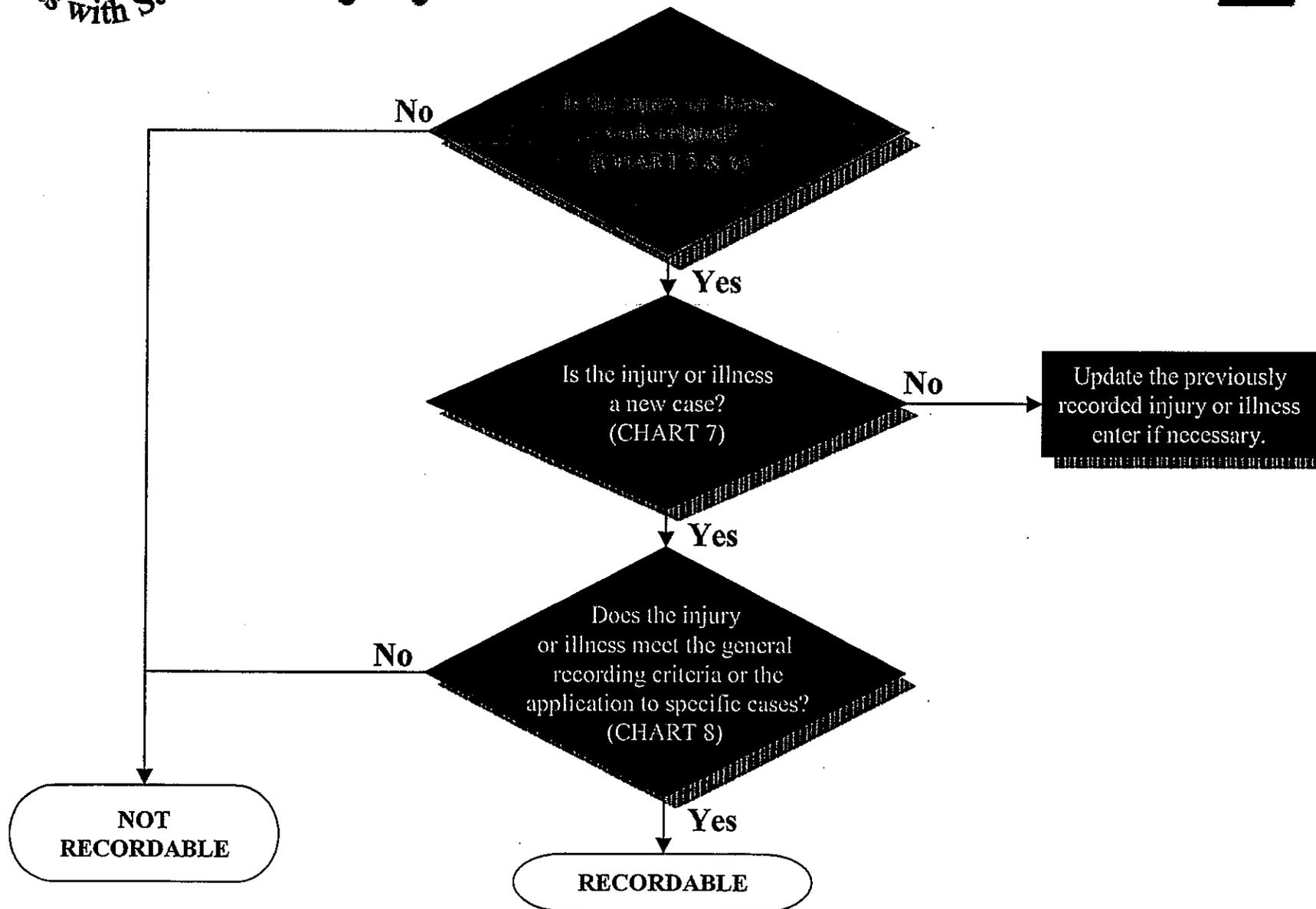
Examples: Insect or snake bite, one-time exposure to chemicals, loss of hearing due to explosion, infection resulting from laceration, respiratory ailment resulting from chemical explosion, back cases

Occupational Illness: Any **abnormal condition or disorder**, other than one resulting from an occupational injury, caused by **exposure to environmental factors** associated with employment.

Examples: Exposure to chemicals over period of time, exposure to industrial noise over period of time, sunburn or welding flash burns resulting from prolonged or repeated exposure, carpal tunnel syndrome



Determining Whether a Particular Injury or Illness is Recordable

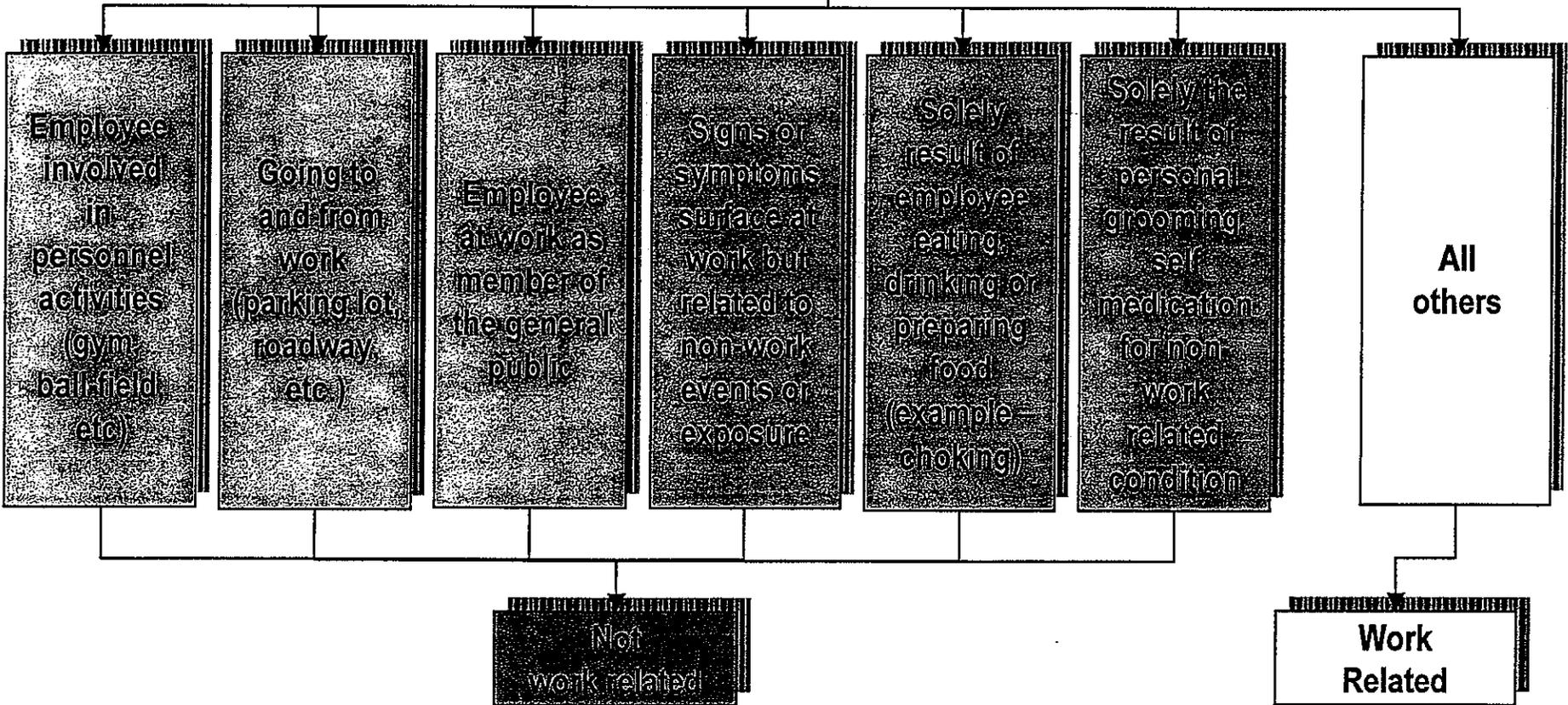




Is Case Work Related? (Employee is On-Site)

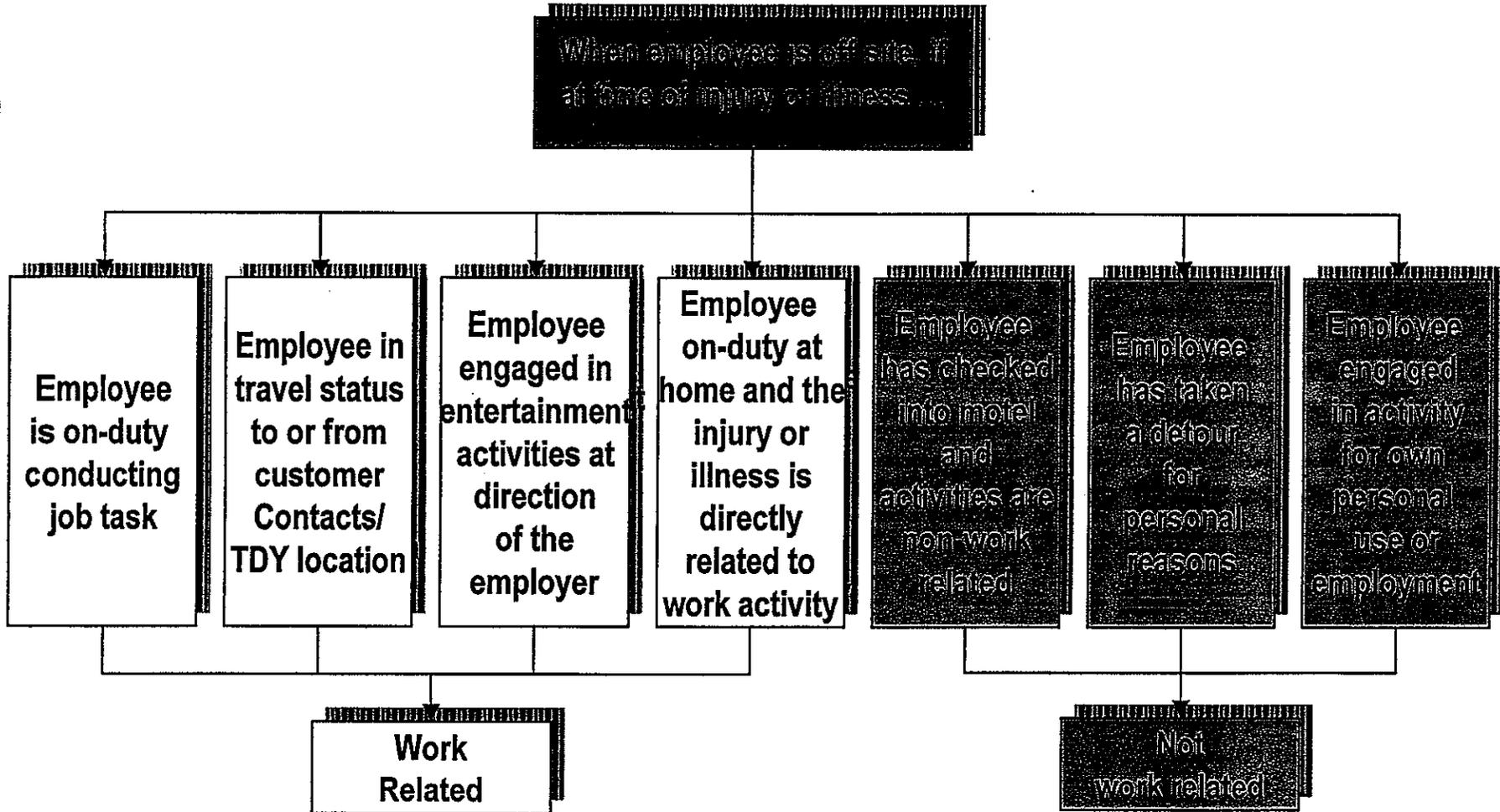


When employee is at work, if at time of injury or illness ...



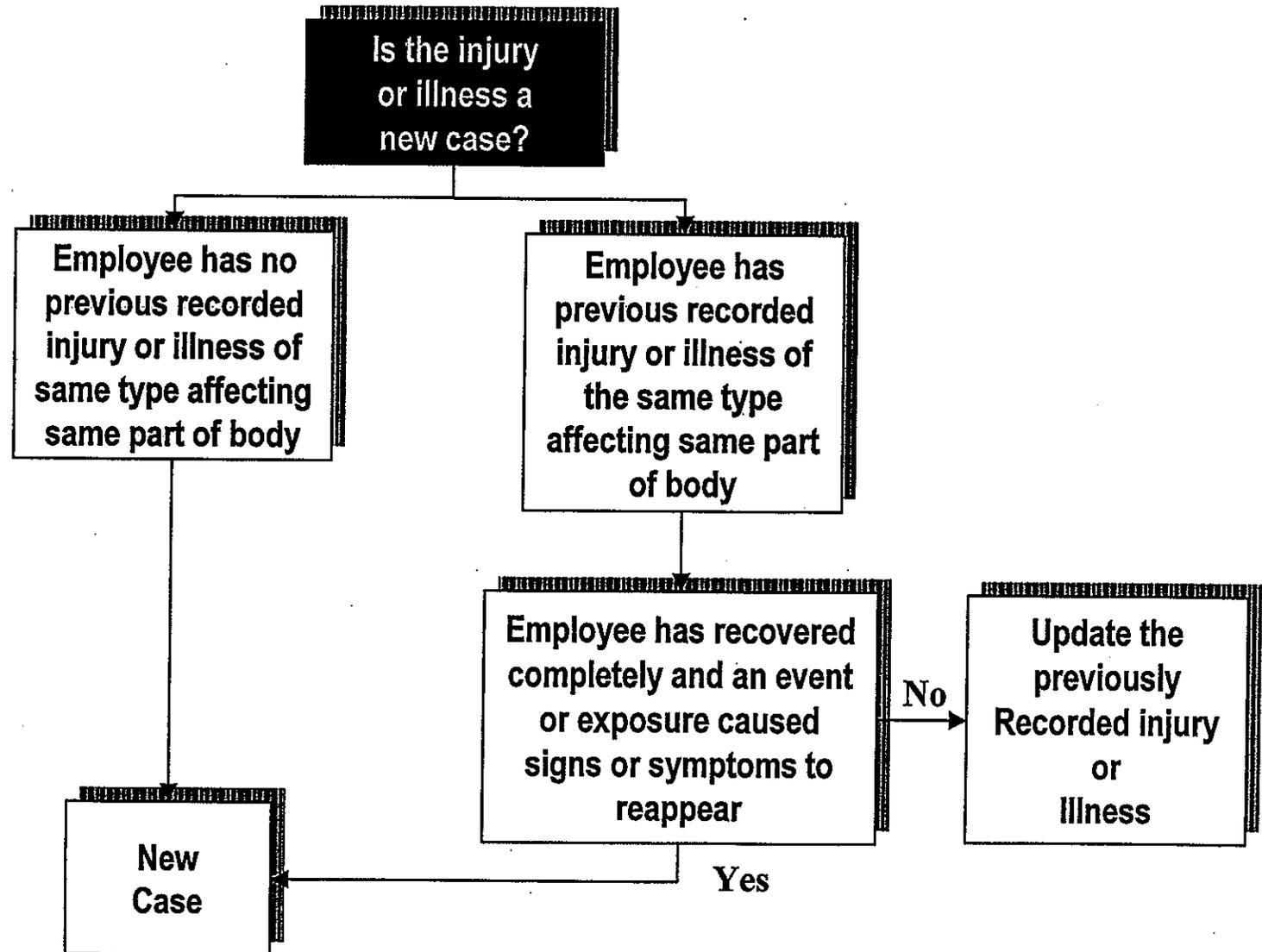


Is Case Work Related? (Employee is Off-Site)



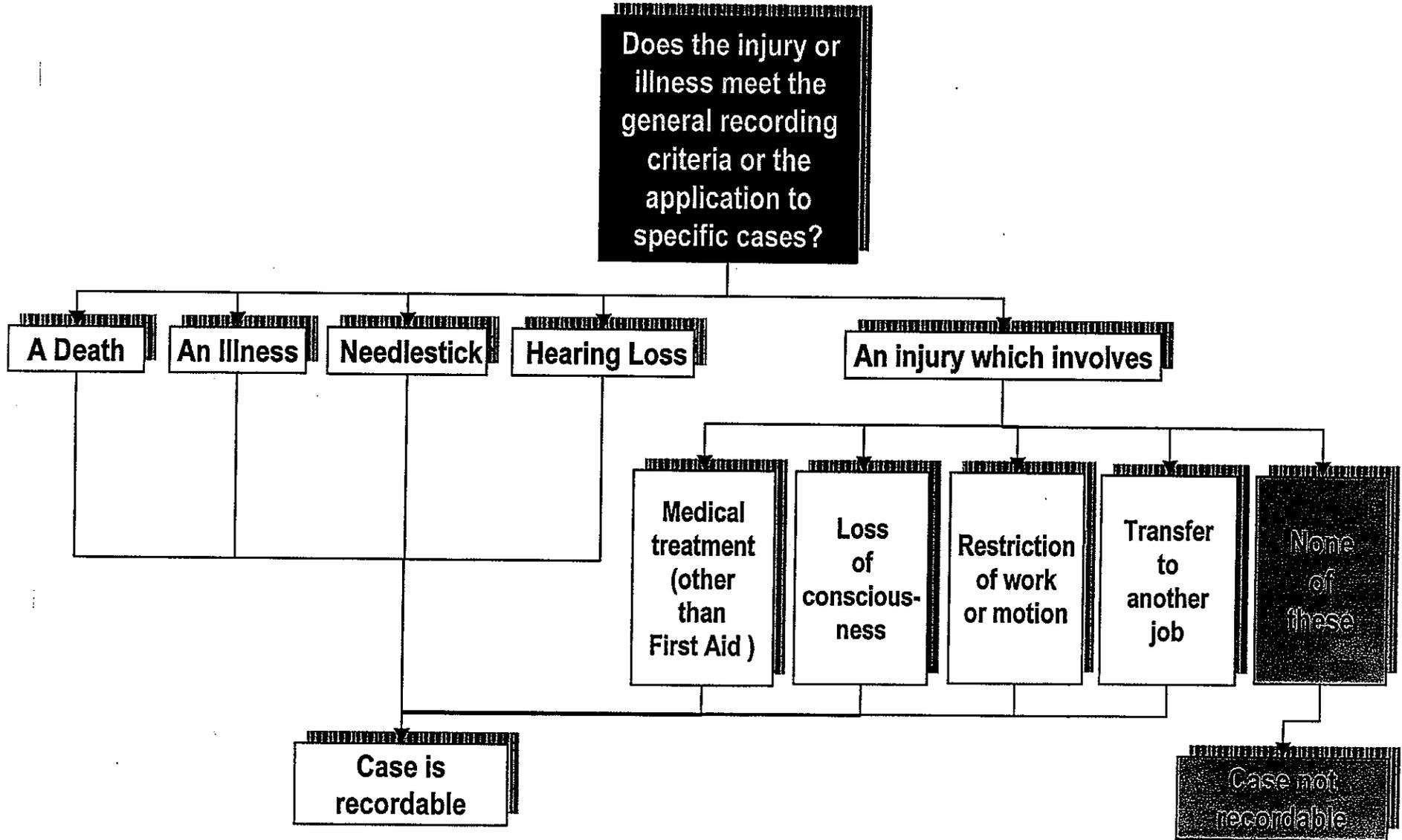


Determining if the Injury or Illness is a New Case





Determining if a Work Related Case is Recordable





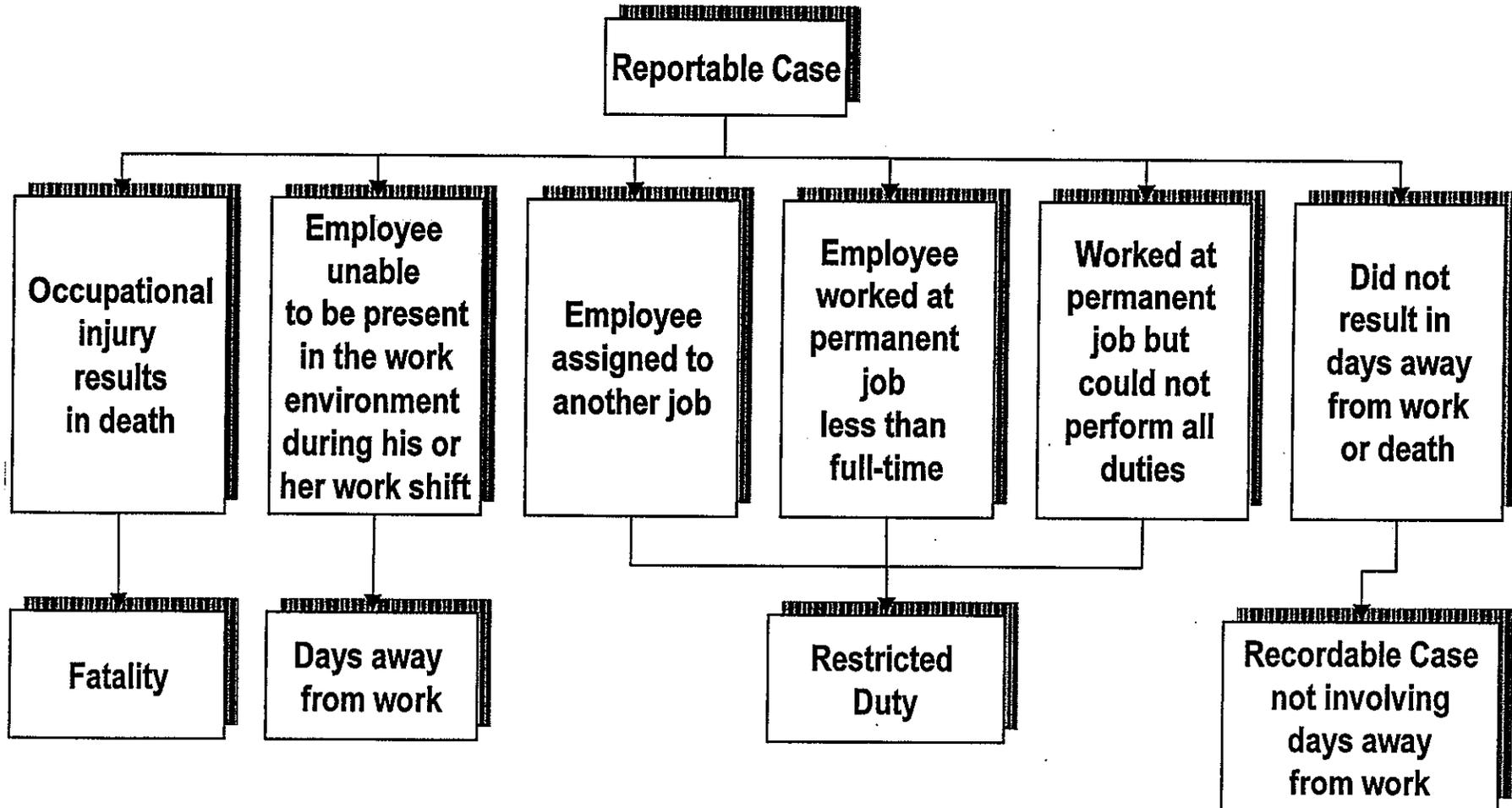
Recordable Case Categories



- **Fatalities**
- **Lost Workday Cases** You must count the number of calendar days the employee was unable to work as a result of injury/illness regardless of whether or not the employee was scheduled to work on those days. Weekends, holidays, and vacation are included – Cap at 180 days. CFR 1904.7(b)(3)(IV)
- **Restricted Duty Case**
- **Recordable Cases without Days Away from Work**



Determining Recordable Case Category



Back-up Charts

Examples of First Aid Cases

CFR 1904.7(b)(5)(ii)

- **Application of bandage(s), Band-Aids, gauze pads, butterfly bandages or Steri-Strips**
- **Use of elastic bandage, wraps, non-rigid back belts, etc.**
- **Removal of foreign bodies from eye using only irrigation or cotton swab**
- **Use of eye patches**
- **Removal of foreign bodies from wound; if procedure is uncomplicated (tweezers or other simple technique)**
- **Use of non-prescription medications at non-prescription strength**
- **Cleaning, flushing or soaking wounds on the surface of the skin**
- **Hot/Cold Therapy**
- **Using temporary immobilization devices while transporting an accident victim (splints/slings, neck collars, back boards)**
- **Drilling of fingernail or toenail to relieve pressure or draining fluid from blister**
- **Using finger guards**

Calculating Rates

$$\text{Lost Time Rate} = \frac{\text{No. of Lost Time Cases} \times 200,000}{\text{Total Hours Worked}}$$

$$\text{Recordable Rate} = \frac{\text{No. of Recordable Cases} \times 200,000}{\text{Total Hours Worked}}$$

SHE Program Corrective Action Targets, Effective 8/5/02: Page 1

SHE Program Benchmark	Corrective Action Planned to Start In 2002	Assignee
1.0 Management Leadership & Employee Involvement		
1.1 Management Commitment	Implement new SHE Committee structure (Star 2.3-01)	VSC
1.2 VPP Commitment	Communicate the VPP standards and solicit involvement in the VPP process throughout MSFC, across all Directorates and contractors. (Star 1.2-01)	MTM SC SCT
1.3 Planning	Implement a new annual SHE planning process including formal policy review, selection of annual goals and objectives, and tracking to support periodic progress reviews (OSHA Visit, #25)	MTM SC QS
1.5.5 Defined Responsibility	Each directorate and committee develops measurable action plans in support of MSFC goal; status, milestones and expectations are periodically documented. (Star 1.1-02; OSHA Visit, #4)	SC
1.8 Annual SHE Program Evaluation	Ensure that top-level management and the safety committee review SHE Program annually, using performance data as basis for deciding to continue, revise, add to, or delete Center and directorate SHE goals and objectives. (OSHA Visit, #5 & #25)	MTM SC QS
1.8 Annual SHE Program Evaluation	Develop a process to enable MSFC to use the PEP Survey more effectively as a SHE Program improvement tool. (Star 1.7-01)	QS SC PEP
1.8 Annual SHE Program Evaluation	Summarize PEP Survey results and, with results of other self assessment activities, include in a narrative report on the annual SHE Program self-evaluation (use format shown in example report received from OSHA). VPP participants are required to submit this report to OSHA annually, on February 15. (Star 1.7-02)	QS PEP SC MTM
2.0 Worksite Analysis		
2.8 Trend Analysis	Analyze injury and illness data to identify apparent trends, and develop and implement corrective action plans to support more positive trends (e.g. the predominance of hand-related injuries and cuts and lacerations). (Star 3.7-02)	MTM QS SC
2.8 Trend Analysis	Analyze trends in injury, illness, and near miss (close call) data to determine whether there is a statistically significant relationship with factors such as employee length of service, repeat injuries, injuries by occupation, etc.; exploit the capabilities of the IRIS database. Analyze data on other performance indicators, such as safety and housekeeping inspection findings, safety related maintenance issues, employee concerns, etc., to identify and document trends and relationships. (Star 3.7-01, and OSHA Visit, #1)	QS AD MTM SC D CSF
3.0 Hazard Prevention & Control		

ENCLOSURE 4

Code	Assignee	Code	Assignee	Code	Assignee	Code	Assignee
AD	Center Operations	ERG	Ergonomics Subcommittee	OPR	Office of Principal Responsibility	SC	SHE Committee
BM	Building Manager Subcommittee	JHA	JHA Subcommittee	OW	Office Worker Subcommittee	SCT	SHE Communications Team
CD	Customer & Employee Relations	LOTO	Lock Out/Tag Out Subcommittee	PEP	PEP Subcommittee	STC	SHE Training Committee
CSF	Contractor Safety Forum	MTM	Marshall Team Meeting	PS	Procurement	VIT	VPP Implementation Team
Di	Directorates or Program Office	OMEH	Occupational Medicine & Environmental Health	QS	Safety & Mission Assurance	VSC	VPP Steering Council

SHE Program Corrective Action Targets, Effective 8/5/02: Page 2

SHE Program Benchmark	Corrective Action Planned to Start In 2002	Assignee
3.1.1 Initiating & Tracking System	Develop and implement a process within each directorate that serves to monitor progress on corrective actions, provide personnel with technical and other resources needed to complete corrective actions, and trigger management action on overdue items. (Star 3.4-03)	D SC MTM QS
3.1.1 Initiating & Tracking System	Periodically report the status and closure rates of Safety Maintenance Work Orders to the SHE Committee and MTM. (Star 4.3-01)	AD SC MTM
3.1.2 Preventive & Predictive Maintenance	Ensure that adequate PM systems and procedures are implemented, function effectively to maintain equipment and facilities in safe operating condition, and that documentation of timely completion and other associated PM records are available for audit. (OSHA Visit, #13)	AD D SC MTM
3.1.9.1 Lockout/Tagout	Improve lockout/tagout process to establish and document functional methods of complying fully with the applicable OSHA standards. (Star 3.2-01)	QS LOTO SC
4.0 Training		

Code	Assignee	Code	Assignee	Code	Assignee	Code	Assignee
AD	Center Operations	ERG	Ergonomics Subcommittee	OPR	Office of Principal Responsibility	SC	SHE Committee
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CD	Customer & Employee Relations	LOTO	Lock Out/Tag Out Subcommittee	PEP	PEP Subcommittee	STC	SHE Training Committee
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SHE Program Corrective Action Targets, Effective 8/5/02: Page 1

SHE Program Benchmark	Corrective Action Planned to Start In 2002	Assignee
1.0 Management Leadership & Employee Involvement		
1.1.1 Policy	Publish, communicate, and post SHE policies throughout MSFC workplace in all Directorates and contractor areas. (Star 1.1-01)	SCT
1.1.2 Goals	Communicate S&H goals in particular, specific objectives to all workers (civil service and contractors) periodically (Star 1.1-03)	D SCT
1.2 VPP Commitment	Communicate the VPP standards and solicit involvement in the VPP process throughout MSFC, across all Directorates and contractors. (Star 1.2-01)	MTM SC SCT
1.5.1 Communications	Ensure that all employees know how to acquire mishap information. (Self-Assess 1, #27)	D SCT
2.0 Worksite Analysis		
2.2 Pre-Use Analysis	Implement a hazard assessment process capable of meeting the current VPP criteria. (Star 3.3-01)	OS JHA
2.4 Hazard Analysis	Define and implement a process for ensuring that each employee has a JHA or uses SOPs containing the results of OSHA-compliant job hazard analyses. (OSHA Visit, #21)	D OS JHA
2.4 Hazard Analysis	Continue to develop and implement an effective JHA process, which includes annual training of employees on their JHA(s), and at least annual review and update of JHA documents. (Star 3.3-01)	D OS JHA
2.4 Hazard Analysis	See 3.3 Improve Hazard Analysis (Star 3.1-01)	JHA
2.4 Hazard Analysis	See Recommendation 4.1-01. (Star 3.3-03)	JHA
2.4 Hazard Analysis	Define, document, and implement an effective process for training personnel to incorporate controls identified in applicable JHAs into existing work procedures. (Star 4.1-01)	JHA D OS
2.4 Hazard Analysis	Assure that risks of musculoskeletal disorders are documented in each employee's Job Hazard Analysis (JHA). (Self-Assess 2, #14)	JHA ERG OS
3.0 Hazard Prevention & Control		
3.1.9.1 Lockout/Tagout	Improve lockout/tagout process to establish and document functional methods of complying fully with the applicable OSHA standards. (Star 3.2-01)	OS LOTO SC
4.0 Training		

Code	Assignee	Code	Assignee	Code	Assignee	Code	Assignee
AD	Center Operations	ERG	Ergonomics Subcommittee	OPR	Office of Principal Responsibility	SC	SHE Committee
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Subcommittee Kick-off

Proposal

- Recommended size is 6-8 persons
 - Need good mix of employees
 - Organizational
 - Contractor and civil service practitioners
- Identify membership within 6 weeks
 - Assigned mentor will support
- Keep minutes!

SH&E COMMITTEE AGENDA
Building 4200, Conference Room P110
2:00 pm, August 28, 2002

- **Opening Remarks (New Chairperson)**
- **Special Reports**
 - **Any Lost Time Mishaps (None at present time)**
 - **Other Reports (As desired by SHE Committee)**
- **Industrial Health Report (D. Thaxton/AD02)**
- **Environmental Health Report (F. Davis/AD10)**
- **Industrial Safety Report (D. Davis/QS50)**
- **Open Actions (D. Davis/QS50)**
- **Sub-Committee Reports (as desired by SHE Committee)**
- **New Business - Open Floor (Chairperson)**
- **Proposed Reports to Marshall Team Meeting (Chairperson)**